

WORKFORCE SERVICES

sdjobs.org

MONITOR PROGRESS REPORT**PART A: PARTICIPANT INFORMATION – DLR Staff complete this section**

NAME: _____ SDWORKS ID: _____

PROVIDER: _____ PROGRAM: _____

EST. DATE OF PROGRAM COMPLETION (if applicable): _____ Monitor Due By: _____

☐ OST/UpSkill☐ RAP☐ AEL☐ TAA**PART B: TRAINING PROVIDER – Provider complete this section**This progress report refers to performance during _____ of _____ for the apprentice named above.

Month *Year*

1. Satisfactory progress in training has been made: Yes No

Class/Course name, Test/Project, or Program	Grade or Hours Completed

2. Have there been any unexcused absences?
- ☐
- Yes
- ☐
- No

If yes, list dates:

3. Do any additional resources or assistance need to be offered for success? Yes No

If yes, what are your recommendations?

4. If program is a Registered Apprenticeship, did the apprentice receive an increase in wages, complete a course, or earn a certification?
- ☐
- YES
- ☐
- NO
- ☐
- Not Registered Apprenticeship

If yes, send copies of verification with this form.

5. Do you have any other comments or concerns?
- ☐
- Yes
- ☐
- No

*If yes, please explain:***QUESTIONS ABOUT THIS MONITOR SHOULD BE DIRECTED TO:**

EMAIL:

PHONE NO.:

COMPLETED BY:**ON DATE:**